	.:-			,					Application	n or i	Docket Nu	mber
	PATENT	APPLICATION Effective	ON I			ION REC	OŖC	ን [']	101	04	947°	3
	4	CLAIMS A	S FILED - PART I (Column 1) (Column 2)			umn 2)	SMALL ENTITY			OF		R THAN L ENTITY
TOTAL CLAIMS								RATE	FEE	٦	RATE	FEE
F	OR	NUMBER FILED NUM			BER EXTRA	İ	BASIC FI		┨ _╭	BASIC FE		
TO	OTAL CHARGE	/9 minus 20= *					X\$ 9=		OF	1	010	
INI	DEPENDENT C	9 minus 3 = *			6		X42=	+	┨ ̄	\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-	501/	
ML	JLTIPLE DEPE	NDENT ÇLAIM P	RESENT				 	+	OR		104	
* 11	f the difference	o in column 1 is	less than zero, enter "0" in column 2					+140=		OR	L	
1	CLAIMS AS AMENDED - PART II							TOTAL	<u> </u>	OR	TOTAL	1394
3	21/05	(Column 1)	AMENDE	D - PAR (Colum		(Column 3)		SMALL	. ENTITY	OR		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 8,	Minus	** /	30			X\$ 9=		OR	X\$18=	
AME	Independent	• 4	Minus	***	9	-	H	X42=		OR	X84=	
	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=	
				•		• `	. L	TOTAL			TOTAL	
		(Column 1)		(Colum	nn 21	(Column 3)	A	DDIT. FEE	L	10	ADDIT. FEE	<u> </u>
0		CLAIMS REMAINING		HIGHE	ST	PRESENT	Г		ADDI-	İ		ADDI-
AMENDMENT B		AFTER AMENDMENT		PREVIO PAID F	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
Ž	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
¥	Independent	*	Minus	***	01.411.6	=	Γ	X42=		OR	X84=	
	rinoi Priese	NTATION OF MU	CHPLE DEI	PENDENT	CLAIM			+140=		OR	+280=	
	_						AI	TOTAL DOIT, FEE		OR ,	TOTAL ODIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENI C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID P	ER JSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
5	Total		Minus	drib		2	十	X\$ 9=	•	<u>"</u> t	X\$18=	FEE
	Independent	+	Minus	***		-	-			OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X42=		OR	X84=	
• #	the entry in colum	nn 1 Is less than the	entry in colu	mn 2. writ 5	O" in colu	smo 3.	Ŀ	+140=		OR	+280=	
~ ₩	the "Highest Nun th "Highest Nun	nber Previously Pai nber Previously Pai	d For IN THIS Id For IN THI	S SPACE is I S SPACE is I	less than less than	20. ent / "20."		TOTAL DIT. FEE			TOTAL DOIT. FEE	

ENCI MIMAIN DAMENTE LAPPE

FORM PTO-678 (Rev. 6/01)